

Practitioner's Docket No. 39238-0753

IN THE UNITED STATES
PATENT AND TRADEMARK OFFICERECEIVED
CENTRAL FAX CENTER

In re application of: Stern

APR 8 2005

Serial No.: 10/072,475

Group No.: 3739

Filed: 02/06/2002

Examiner: Peffley, Michael F..

For: Handpiece for Treatment of Tissues

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION**Introductory Comments**

Responsive to the office action mailed 01/03/2005, please consider the following amendments and remarks.

Claims listing begins on page 2 of this paper.

Remarks begin on page 18.

Attorney Docket No.: 39238-0753
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AMENDMENT OR RESPONSE TO OFFICE ACTION - PAGE 1

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2251 8/60

CONCLUSION

It is submitted that the present application is in form for allowance, and such action is respectfully requested.

The Commissioner is authorized to charge any additional fees which may be required, including petition fees and extension of time fees, to Deposit Account No. 08-1641 (Docket No. 39238-0753).

Respectfully submitted,

HELLER EHRLMAN WHITE & McAULIFFE

Date: 4/8/05


Paul Davis, Reg. No. 29,294

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AMENDMENT OR RESPONSE TO OFFICE ACTION - PAGE 19

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**COMBINED FEE TRANSMITTAL
for FY 2005**

Effective 12/08/2004. Patent fees are subject to annual revision.

PTO/SB/17 (12-04) (Revised) (For payment of 37 CFR 1.17 fees including (f), (g), (h), & (i))

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (S)**

| | | Complete if Known | | | |
|----------------------|--|---------------------|--|--|--|
| Application Number | | 10/072,473 | | | |
| Filing Date | | 02/06/2002 | | | |
| First Named Inventor | | Stern | | | |
| Examiner Name | | Peffley, Michael P. | | | |
| Art Unit | | 3739 | | | |
| Attorney Docket No. | | 39238-0753 | | | |

METHOD OF PAYMENT (check one)

| | | | | |
|---|--------------------------------------|--------------------------------------|--------------------------------|-------------------------------|
| <input type="checkbox"/> Check | <input type="checkbox"/> Credit card | <input type="checkbox"/> Money Order | <input type="checkbox"/> Other | <input type="checkbox"/> None |
| <input checked="" type="checkbox"/> Deposit Account | | | | |

Deposit Account Number: 08-1641

Deposit Account Name: Heller Ehrman White & McAuliffe LLP

The Commissioner is authorized to: (check all that apply)

 Charge fee(s) indicated below Credit any overpayments and charge any deficiencies Charge any additional fee(s) during the pendency of this application Charge fee(s) indicated below, except for the filing fee to the deposit account**FEES CALCULATION (continued)**

| | |
|---|----------|
| 4. PETITION FEES UNDER 37 CFR 1.17 (f) | Fee Paid |
| Fee Code: 1462 Fee \$ 400 For petitions filed under: § 1.53(c); § 1.57(a); § 1.182; § 1.183; § 1.376(e); § 1.741(b) | |

| | |
|---|----------|
| 5. PETITION FEES UNDER 37 CFR 1.17 (g) | Fee Paid |
| Fee Code: 1463 Fee \$ 200 For petitions filed under: § 1.12; § 1.14; § 1.47; § 1.59; § 1.103(a); § 1.136(d); § 1.293; § 1.296; § 1.377; § 1.550(e); § 1.956; § 5.12; § 5.15; § 5.23 | |

| | |
|--|----------|
| 6. PETITION FEES UNDER 37 CFR 1.17 (h) | Fee Paid |
| Fee Code: 1464 Fee \$ 130 For petitions filed under: § 1.19(g); § 1.84; § 1.91; § 1.102(d); § 1.138(a); § 1.313; § 1.314 | |

| | |
|---|----------|
| 7. PROCESSING FEES UNDER 37 CFR 1.17 (i) | Fee Paid |
| Fee Code: 1804 (1803 for § 1.221) Fee \$ 130 For petitions filed under: § 1.28(g)(c); § 1.41; § 1.48; § 1.52(d); § 1.55; § 1.99(c); § 1.103(b); § 1.103(c); § 1.103(d); § 1.217; § 1.221; § 1.291(c)(5); § 1.497(d); § 5.81 | |

| | |
|-------------------------------------|-----------------|
| 8. OTHER FEES | Fee Paid |
| Entity Fee (\$) | Entity Fee (\$) |
| 130 | 65 |
| Surcharge - late filing fee or cash | |

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | |
|------------------|-----------------|-----------------------|-----------------|-----------------------|------------------|-----------------------|---------------|
| Application Type | Entity Fee (\$) | Small Entity Fee (\$) | Entity Fee (\$) | Small Entity Fee (\$) | Entity Fee (\$) | Small Entity Fee (\$) | Fee Paid (\$) |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 135 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |
| | SUBTOTAL (1) | | \$ 0 | | | | |

2. EXTRA CLAIM FEES

| Entity Fee (\$) | Small Entity Fee (\$) | Fee Description |
|-----------------|-----------------------|---|
| 50 | 25 | Each claim in excess of 20 or, for Reissues, each claim in excess of 20 and more than in the original patent |
| 200 | 100 | Each independent claim in excess of 3 or, for Reissues, each independent claim more than in the original patent |
| 360 | 180 | Multiple dependent claim, if not already paid |
| | | |

| | Extra Claims above | Fee Paid |
|--|--------------------|----------|
| Total Claims | -20** = | x = |
| Independent Claims | -3** = | x = |
| ** or number previously paid, if greater. For Reissues, see below. | | |
| Multiple Dependent | | = |
| | SUBTOTAL (2) | |

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof (round up to the whole number). See 35 U.S.C. 41(e)(1)(G) and 37 CFR 1.16(e).

| Total Sheets | Extra Sheets | Number of each additional 50 | Fee (\$) | Small Entity Fee (\$) |
|--------------|--------------|------------------------------|----------|-----------------------|
| -100 = | /50 = | | x 250 OR | x 125 |
| SUBTOTAL (3) | | | | \$ 0 |

* Reduced by Basic Filing Fee Paid

| SUBMITTED BY | | | | Complete if applicable | |
|-------------------|------------|--|-----------------------------------|------------------------|------------------------|
| Name (Print/Type) | Paul Davis | | Registration No. (Attorney/Agent) | 29,294 | Telephone 650 324-7041 |

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2251 \$60.00

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PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number:
10/072475

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| FOR | NUMBER FILED | NUMBER EXTRA | SMALL ENTITY | OTHER THAN SMALL ENTITY |
|---|--------------|--------------|--------------|-------------------------|
| BASIC FEE (37 CFR 1.16(a)) | | | | |
| TOTAL CLAIMS (37 CFR 1.16(c)) | minus 20 = | | X \$ ___ = | |
| INDEPENDENT CLAIMS (37 CFR 1.16(b)) | minus 3 = | | X \$ ___ = | |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) | | | + \$ ___ = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2. | | | TOTAL | |

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | SMALL ENTITY | OTHER THAN SMALL ENTITY |
|---|---|-------|---|------------------|-----------------|----------------------------|
| | | Minus | *** | = | RATE | ADDITIONAL FEE |
| i. (37 CFR 1.16(c)) | 98 | Minus | 104 | = | X \$ ___ = | |
| Independent (37 CFR 1.16(b)) | 31 | Minus | 31 | = | X \$ ___ = | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | + \$ ___ = | |
| | | | | | TOTAL ADD'L FEE | |
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | SMALL ENTITY | OTHER THAN SMALL ENTITY |
| Total (37 CFR 1.16(c)) | | Minus | ** | = | X \$ ___ = | |
| Independent (37 CFR 1.16(b)) | | Minus | *** | = | X \$ ___ = | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | + \$ ___ = | |
| | | | | | TOTAL ADD'L FEE | |

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | SMALL ENTITY | OTHER THAN SMALL ENTITY |
|---|---|-------|---|------------------|-----------------|----------------------------|
| | | Minus | ** | = | RATE | ADDITIONAL FEE |
| Total (37 CFR 1.16(c)) | | Minus | ** | = | X \$ ___ = | |
| Independent (37 CFR 1.16(b)) | | Minus | *** | = | X \$ ___ = | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | + \$ ___ = | |
| | | | | | TOTAL ADD'L FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to be granted by the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is a burden imposed by the public on itself, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual user and the complexity of the application. If you have comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.